CALIFORNIA'S TITLE XIX STATE PLAN FOR ASSURANCE OF TRANSPORTATION

Under California's Title XIX State Plan, transportation of eligible recipients to and from health care services is assured through a variety of methods. These methods include both the provision of medical transportation as a direct benefit of the Title XIX program and indirectly through other programs and resources.

As a direct benefit, California provides both emergency and nonemergency medical transportation (see Attachment A). Emergency medical transportation does not require prior authorization, but must be medically justified and documented. Nonemergency medical transportation is subject to prior authorization and is covered when the recipient's medical and physical condition is such that transport by ordinary means of public or private conveyance is medically contraindiacated and the transportation is required for the purpose of obtaining necessary health care covered by the Medi-Cal program.

When the recipient does not qualify for medical transportation, the Medi-Cal field office staff will advise the recipient to contact his or her social worker at the county welfare department (Attachment B). Nonmedical transportation of Medi-Cal recipients to Medi-Cal covered services is assured through the programs and methods listed in Attachmer C, Summary, or through other local transportation resources.

Attachment(s)

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(p. 1276.2)

(Register 83, No. 4-1-22-83)

TITLE 22

51323. Medical Transportation Services.

(a) Ambulance, litter van and wheelchair van medical transportation services are covered when the beneficiary's medical and physical condition is such hat transport by ordinary means of public or private conveyance is medically ontraindicated, and transportation is required for the purpose of obtaining needed medical care.

(1) Ambulance services are covered when the patient's medical condition

contraindicates the use of other forms of medical transportation.

(2) Litter van services are covered when the patient's medical and physical

(A) Requires that the patient be transported in a prone or supine position, because the patient is incapable of sitting for the period of time needed to

(B) Requires specialized safety equipment over and above that normally available in passenger cars, taxicabs or other forms of public conveyance.

(C) Does not require the specialized services, equipment and personnel provided in an ambulance because the patient is in stable condition and does not need constant observation.

(3) Wheelchair van services are covered when the patient's medical and

physical condition:

(A) Renders the patient incapable of sitting in a private vehicle, taxi or other form of public transportation for the period of time needed to transport.

(B) Requires that the patient be transported in a wheelchair or assisted to and from residence, vehicle and place of treatment because of a disabling physical or mental limitation.

C) Requires specialized safety equipment over and above that normally available in passenger cars, taxicabs or other forms of public conveyance.

(D) Does not require the specialized services, equipment and personnel provided in an ambulance, because the patient is in stable condition and does not need constant observation.

(b) Authorization shall be granted only for the lowest cost type of medical transportation that is adequate for the patient's medical needs, and is available

at the time transportation is required.

(1) Emergency medical transportation is covered, without prior authorization, to the nearest facility capable of meeting the medical needs of the patient. each claim for program reimbursement of emergency medical transportation shall be accompanied by a written statement which will support a finding that an emergency existed. Notwithstanding Section 51056 (b), the statement may be made by the provider of the emergency transportation, describing the circumstances necessitating the emergency service. The statement shall include the name of the person or agency requesting the service, the nature and time of the emergency, the facility to which the patient was transported, relevant clinical information about the patient's condition, why the emergency services rendered were considered to be immediately necessary and the name of the physician accepting responsibility for the patient at the facility.

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(Register 82, Nc. 49-12-4-82)

(p. 1276.2.1)

(2) All nonemergency medical transportation, necessary to obtain program covered services, requires a physician's, dentist's or pediatrist's prescription and prior authorization. When the service needed is of such an urgent nature that written authorization could not have reasonably been submitted beforehand, the medical transportation provider may request prior authorization by tele-phone. Such telephone authorization shall be valid only if confirmed by a written request for authorization. Transportation shall be authorized only to the nearest facility capable of meeting the patient's medical needs.

(c) Medical transportation by air is covered under the following conditions: (1) For emergencies, only when such transportation is medically necessary

as demonstrated by compliance with paragraph (b) (1) and either of the follow-

(A) The medical condition of the patient precludes other means of medical transportation as indicated in the statement submitted in accordance with paragraph (b) (1).

(B) The patient or the nearest hospital capable of meeting the medical needs of the patient is inaccessible to ground medical transportation, as indicated in the statement submitted in accordance with paragraph (b) (1).

(2) For nonemergencies, only when transportation by air is necessary because of the medical condition of the patient or practical considerations render ground transportation not feasible. The necessity for transportation by air shall be substantiated by content of a written order of a physician, podiatrist or

Memorandum

Department of Health Services Attachment B

Field Office Administrators

Date :

July 9, 1982

Subject:

FIN 7-82

Non-emergency Trans-

portation Denial

Notices

From : Tom Heerhartz, Chief Field Services Branch 8/1516

NON-EMERGENCY TRANSPORTATION DENIAL NOTICES

This revision replaces FIN 81-10. This updated notice is to be mailed to beneficiaries, if possible, in all cases when the medical and physical condition is such that he/she can travel by public or private conveyance, but may not have a car , or have access to a car, or be able to afford payment for public transportation to obtain medical services covered under the Medi-Cal program. If you are unable to forward this notice to the beneficiary, send it to the provider.

As before, you should complete the notice with: 1) the name(s) and phone number(s) that beneficiaries may use to contact the local Department of Social Services for assistance with their transportation needs, and 2) information with phone number(s) regarding any free or low cost transportation that exists in all or part of your field office area.

This notice to the beneficiary should be included with any TAR that is returned to a provider on which Medi-Cal transportation authorization is denied because the patient's medical or physical condition does not medically contraindicate the use of public or private transportation. In addition, the notice should be included in letters sent to beneficiaries when their medical transportation services to dialysis, chemotherapy, or radiation therapy are terminated.

If you have any questions regarding this matter or the suggested format for the notice, please let me know. I would like you to start using this new notice immediately.

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| To: | Medi-Cal Beneficiary | |
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| And/ Or Via: | Provider of Medical Transportation | |
| From | Medi-Cal Field Office | |
| From: | Address | |
| | Phone Number | |

A Medi-Cal Consultant has determined that your request for authorization or reauthorization of Medi-Cal transportation under Title 22, California Administrative Code, Section 51323 cannot be approved. The reason for the denial is that, in the judgment of the Medi-Cal Consultant, your current medical or physical condition does not contraindicate your use of normal public or private transportation conveyances. Title 22 regulation allows authorization of Medi-Cal payment for transportation only when an individual's condition requires medical transportation such as an ambulance or specially equipped Medi-Van.

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In order to assist you in arranging transportation, we have listed the names and phone numbers of any organizations that we are aware of that provide free or low cost transportation.

(FIELD OFFICE ENTERS NAME(S), ADDRESSES, AND PHONE NUMBERS OF FREE OR LOW COST TRANSPORTATION COMPANIES)

We strongly suggest that, before you contact these organizations, you should check with friends, neighbors, or relatives to see if they can provide transportation. You may want to look into the availability of other public and private modes of transportation such as buses, Dial-A-Ride programs, or taxi cabs. In the event you cannot obtain transportation at the time of your appointment, you may wish to reschedule the appointment or investigate obtaining medical care at a location closer to your place of residence.

If you are unable to obtain transportation through your own resources or those we have listed above, you should contact the local office of your county Department of Social Services at the phone number listed below. They may be able to arrange transportation.

(FIELD OFFICE ENTERS NAMES, ADDRESSES AND PHONE NUMBERS OF COUNTY OFFICE(S) OF PUBLIC SOCIAL SERVICES)

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SUMMARY

The following is a summary of other programs and other methods of assuring transportation to and from health services in addition to Title 22, California Administrative Code (CAC), Section 51323 transportation provisions.

- Section 9000 et. seq., (Welfare and Institutions [W&I] Code), Aging, Section 9002 (f). State policy stipulates that Older Californians Act programs must include transportation services.
- Section 9400-9407 (W&I Code). These sections make provision for multipurpose senior services, and Section 9407 includes transportation services.
- 3. Section 13004 (e) (W&I Code), Social Services. This statute requires that counties provide or pay for transportation to and from health care facilities, or the location of other health care providers when there is an urgent need for health care and other transportation resources are not available. Transportation services must be maintained at least at the level provided by counties prior to September 30, 1981.

Chapter 10, Statutes of 1983, First Extraordinary Session (AB 28) which was signed by the Governor February 17, 1983, removed language which specified that the provisions of Section 13004 (e) expired on December 31, 1982.

- 4. Sections 30.051, 30.052, 30.053, and 30.054 (Department of Social Services -- Manual of Policies and Procedures [DDS-MPP]). These sections define information and referral services, health-related transportation and urgent need; specify intent, eligibility, and the conditions necessary for provision of health-related transportation.
- 5. Section 12300, (W&I Code), In-Home Supportive Services. Supportive services under this section include but are not limited to ...necessary travel to health-related appointments or to alternative resource and other essential transportation....
- 6. Section 14200, (W&I Code), Prepaid Health Plans. The provisions of this section state that members of a health plan shall be informed of all available services including information concerning emergency transportation arrangements offered by the plan and the availability of public transportation.

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- 7. Section 14503 (d), (W&I Code), Family Planning. This section provides that family planning services shall be offered to all eligible individuals who voluntarily request such services. Family planning services shall include, but not be limited to facilitating services such as transportation and child care services needed to attend clinic or other appointments.
- 8. Section 14520, et. seq., (W&I Code), Adult Day Health Care. Required services, Section 14550 (h), and (i) includes transportation service for participants, and a provision for ambulance transportation.
- 9. Section 19000 et. seq. (W&I Code), Rehabilitation. Vocational rehabilitation services include health service and transportation in connection with the rendering of any other vocational rehabilitation service. Title 22, CAC, Section 51014 stipulates that if the Department of Health Services concurs in the vocational relevancy of proposed rehabilitation services, Department of Rehabilitation will provide case management and make appropriate recommendations on requests for prior authorization.
- 10. Section 248, et. seq., (Health and Safety [H&S] Code), California Children Services (CCS) Program. Section 249 makes provision for services for physically defective or handicapped minors, and specifies that the Department of Health Services shall cooperate with the medical, health, nursing, and welfare groups and organizations concerned with the program. Section 251 (j) includes transportation as a service. Title 22, CAC, Section 51013 maintains that needed medical care not normally provided through the CCS program shall be provided through procedures established in Medi-Cal regulations.
- 11. Section 320, (H&S Code), Child Health Disability Prevention Program (CHDP) It is the intent of this section that CHDP programs shall make maximum use of existing health care resources. CHDP regulations provide for transportation services to health assessments and appointments.
- 12. Section 341, (H&S Code), Genetically Handicapped Persons Program.

 The program established under Section 342 (m) includes transportation as a medical and social support service.
- 13. Section 1187.5 (4), (H&S Code) Rural Health Services. Section 1187.5 (4). Project proposals or project elements may provide transportation appropriate to achieving the goal of making health care services available to residents of rural areas.

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14. Section 42-675, Individuals to be Served by the Separate Administrative Unit (SAU), Work Incentive Program (WIN), (DSS-MPP); 42-680, Mandated Supportive Services; 42-682, Optional Supportive Services.

Sections 42-675 and 42-680 state that when the registrant or a family member may require services which cannot be paid for from WIN supportive services, such services are to be provided from Title XX or other service programs. Section 42-682 states that each local WIN-SAU may provide as a special nonrecurring supportive service the optional WIN service, transportation.

Section 42-682.1.11 (DSS-MPP) defines transportation, and Section 42-682.1.12 states that transportation may be provided or purchased only when no other means is available.

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